

* NOTICES *

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EXAMPLE

[Example]Below the effect to the osteoporosis patient of Homo sapiens of the treating agent of this invention is shown, and it explains to it concretely.

[0023]for the involution osteoporosis patient, high grade EPA-E pharmaceutical preparation (Epadel (trademark): -- Mochida Pharmaceutical 6 capsule (1800 mg as EPA-E)-- Japanese) was divided into 2 thru/or 3 times, and was prescribed for the patient for three to six months in taking orally. The spinal column bone density patient's administration before and after administration was measured, and the rate of change was compared with the thing of the control group (EPA-E un-prescribing a medicine for the patient). If in charge of measurement of bone density, the average bone density (L_2-L_4BMD (mg/cm^2)) from second lumbar vertebra to fourth lumbar vertebra was measured by dual-energy x-ray absorptiometry (DPXA) using DPX (made by LUNER).

[0024]The bone density and the rate of change (%), and the (average value ** standard error) administration before of each group and after administration are shown in the 3rd table.

[0025]

** 3 table Rate of change after front [----- L_2-L_4BMD -----]

-- administration] (mg/cm^2) administration (mg/cm^2) (%)

----- EPA-E administration group. $0.862^{**}0.024$ $0.879^{**}0.026$

$1.90^{**}0.80$ Control group $0.995^{**}0.094$ $0.977^{**}0.095$ $2.11^{**}0.75$. The change in BMD of the vertebra measured by a ----- this gentleman method is often reflecting the change in the cancellous bone in the vertebra.

It is an index with which progress of osteoporosis is expressed well.

[0026]Each rates of change of the vertebra BMD in an EPA-E administration group are +4.0%, +2.2%, +0.2%, and +1.2%.

All increased BMD clearly.

On the other hand, in the EPA-E group not prescribing a medicine for the patient, the vertebra BMD was decreasing intentionally. That is, change of BMD in an involution osteoporosis patient was intentionally changed from reduction to the increase by prescribing high grade EPA-E pharmaceutical preparation for the patient. Side effects in particular were not accepted in the EPA-E administration group.

[0027] Since as for the above result it became clear [the treating agent of this invention] that a high ratio of consumed water (as a matter of fact 100%) is actually shown also in human osteoporosis and the side effects were not accepted, either, it became clear that EPA-E was very useful in human osteoporosis. this invention begins to have proved the usefulness in the human osteoporosis of EPA-E, and it comes out. EPA-E is compared with EPA and the toxicity in internal use is reduced. Since EPA (free object) is acidity, it has the stimulus to membrane, in prescribing EPA for the patient as a salt on the other hand, in order to also take in ion, such as sodium and potassium, simultaneously, there is fear of superfluous ingestion of salts in long-term repetitive administration, but the worries do not exist at EPA-E. EPA-E is excellent also in such a point. And EPA-E is excellent in safety and is used as a remedy of the arteriosclerosis obliterans also with very few side effects in Japan.

[Translation done.]